

AMERICAN FIRST DAY COVER SOCIETY

Membership Application

Date: _____

Status: ☐ New Member

☐ Reinstatement/Old AFDCS # _____

Type: ☐ Regular \$35 ☐ Junior \$20 ☐ International \$100 ☐ Family +\$3 each*
☐ Online \$24 ☐ Silver \$60 ☐ Gold \$100 ☐ Three-Year \$100

Print the following information as you want it to appear in the AFDCS's official records.

First Name _____ Last Name _____

Street or POB _____

City _____ State _____ ZIP _____

Email _____ Country _____

Age (if under 18) _____

* Additional family members: _____

Note: family memberships do not receive additional subscriptions to *First Days*.

I agree to abide by the rules and bylaws of the AFDCS.

Signature: _____

Proposed by First Days or member (optional) _____ AFDCS# _____

All members, except online members, receive six issues of *First Days* per year by mail. All members have access to the online version of *First Days*. Online members have access to the online version only. Submit your dues with your application or join online at the secure AFDCS website. Make US fund checks and money orders payable to AFDCS. PayPal (preferred), Mastercard, VISA and American Express and payments are also accepted.

AFDCS

P.O. Box 246, Colonial Beach, VA 22443-0246

AFDCS@AFDCS.ORG | www.AFDCS.org

